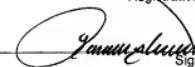


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 089995-000000US									
FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>											
Application Number 10/531,855	Filed November 2, 2005										
For PROTEIN MODIFICATION											
Art Unit 1633	Examiner Kelaginamane T. Hiriyanna										
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.											
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):											
	<u>Fee</u>	<u>Small Entity Fee</u>									
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ _____								
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ 245								
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ _____								
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$ _____								
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$ _____								
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> .											
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
I am the <table style="margin-left: 20px;"> <tr> <td><input type="checkbox"/></td> <td>applicant/inventor.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>attorney or agent of record. Registration Number <u>43,184</u>.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</td> </tr> </table>				<input type="checkbox"/>	applicant/inventor.	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number <u>43,184</u> .	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____
<input type="checkbox"/>	applicant/inventor.										
<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).										
<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number <u>43,184</u> .										
<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____										
 Signature		<u>May 19, 2010</u> Date									
<u>Lance A. Termeres, Reg. No. 43,184</u> Typed or printed name		<u>650-326-2400</u> Telephone Number									
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>											
<input checked="" type="checkbox"/> Total of <u>1</u> form is submitted.											